PROFIT CORPORATION ANNUAL REPORT

1999

RADCAP, INC.

DOCUMENT # 840212

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90015 044 ***150.00

Principal Place	of Business	Mailing Address				, 4 , 4, 4 , 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4,	
3151 N. 36TH.		3151 N. 38TH. ST.					
HOLLYWOOD F		HOLLYWOOD FL 33021					
					DO NOT WRITE IN T	HIS SPACE	
l					3. Date Incorporated or Qualifed 03/15/1978		
2. Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number	Α	Applied For
21		26			11-2243828	l l	lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional
22	وينس شمارك والمحادث			-	5. Certificate of Status Desired	Fee F	Required
City & State	9	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Country	•	8. This corporation owes the current year		_ }
24	25	29 30			Personal Property Tax.	Yes	□No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registe	red Agent	
\$4 <i>15</i> -16	IOTEIN OTANIEV		81	Name			
	NSTEIN, STANLEY		82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	N. 36TH. ST.		02	Olicet Addit	sas (1.0. box Humber to Not Not place)]
HOL	LYWOOD FL 33021		83		and a feet		· ·
1			84	City		FI 85 Zip	Code
44	- II	2 and COT 1509 Florida Statutos	the above	nomed come			ts registered
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the obligations.	of Florida, Such change was auth tions of, Section 607.0505, Florida	orized by Statutes	the corporatio	oration submits this statement for the purposin's board of directors. I hereby accept the a	ppointment as r	registered
SIGNATURE	Signature, typed or printed name of registered ager	et and title if anolicable (NOTE: Re	nistered Aper	nt signature required	f when reinstating) DAT	ε	
12.					ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	ORS IN 12
TITLE			1.1 TITLE	1		☐ Change	
NAME	WEINSTEIN, STANLEY		1.2 NAME				
STREET ADDRESS	3151 N. 36TH. ST.			T ADDRESS			}
	HOLLYWOOD FL		1.4 CITY-S				
CITY-ST-ZIP	D	☐ DELETE	2.1 TITLE	11-21		Change	Addition
WEDIOTERS STANIEV		2.2 NAME			_ ,	- 1	
NAME	3151 N. 36TH. ST.			T ADDRESS			
STREET ADDRESS	HOLLYWOOD FL						
CITY-ST-ZIP	TIOLET WOOD FL	DELETE -	2. 4 CITY-5 3.1 TITLE	SI-ZIP		- Change	Addition
TITLE	•	C Deceie					
NAME			3.2 NAME	T 4000FG5		,	
STREET ADDRESS				TADDRESS			
CITY-ST-ZiP		☐ Scierc	3.4. CITY- S	ST-ZIP		Change	Addition
TITLE	•	☐ DELETE	4.1 TITLE	•		L; Change	S LI Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	TADDRESS			Į
CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE	***	☐ DELETE	5.1 TITLE	Ì		☐ Change	Addition
NAME	•		5.2 NAME			•	}
STREET ADDRESS	•		5.3 STREE	T ADDRESS			[
CITY-ST-ZIP	,		5.4 CITY-S	T-ZIP			
TITLE		□ DELETE	6.1 YITLE			☐ Change	Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or one attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP